

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	11 21 00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	<i>LS</i>	<i>6430</i>	<i>1-2</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10/2/02
2	✓	✓	5/1/03
3	✓	✓	10/2/02
4	✓	✓	10/2/02
5	✓	✓	10/2/02
6	✓	✓	10/2/02
7	✓	✓	10/2/02
8	✓	✓	10/2/02
9	✓	✓	10/2/02
10	✓	✓	10/2/02
11	✓	✓	10/2/02
12	✓	✓	10/2/02
13	✓	✓	10/2/02
14	✓	✓	10/2/02
15	✓	✓	10/2/02
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28	✓	✓	10/2/02
29	✓	✓	10/2/02
30	✓	✓	10/2/02
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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